As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled <u>Spillproof Refrigerator Shelf</u>, the specification of which:

	(check	X	is attached hereto.			
	one)			as Application Serial No (if applicable)	and was amended on	
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.					
			to disclose informat ederal Regulations,		tion of this application in accordance	
-	George L. Rideout Policinski, Reg. No jointly, and each o revocation, to pros transact all busine	, Jr., c. 26 f the secut ss in s in (	Reg. No. 43,880, Leg. 621, General Electric m severally, my atto e this application, to the Patent and Trade connection with this application.	egal Operation, Appliance Park 2-225 ic Company, 3135 Easton Turnpike, rneys and attorney, with full power o make alterations and amendments t	Bldg. W3D, Fairfield, CT 06431-0001, f substitution, delegation and therein, to receive the patent and to I hereby direct that all correspondence	
	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
	Full name of sole	or fir	st inventor <u>David W</u>	ayne Masker		
	Inventor's signatur Residence <u>Louisy</u> Citizenship <u>Unite</u> Post Office Addres	ville, ed St	ates	Road, Louisville, Kentucky 40299	Date	
	Full name of secon	nd jo	int inventor, if any <u>R</u>	ichard Anthony Stich		
•	Second Inventor's Residence Louise Citizenship Unite Post Office Addres	<u>ville,</u> d Sta	Kentucky ates	, Louisville, Kentucky 40299	Date	
	Full name of third	joint	inventor, if any Milto	on Edward Rickert		
	Residence West	oort, d Sta	Kentucky ates	estport, Kentucky 40077	Date	

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Full name of fourth Joint inventor, Richard A. Dillingham	PATENT - 9D-HR-19109 - Masker et al
Fourth Inventor's signature	Date
Full name of fifth joint inventor, if any Ellen Buell Throdahl	
Fifth Inventor's signature	Date
Full name of sixth joint inventor, if any <u>Lisa Steele</u>	
Sixth Inventor's signature	Date